PTO/SB/17 (10-08)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known						
				Application Nun	nber	10/827,446-Conf. #2718				
FEE TRANSMITTAL				Filing Date		April 20, 2004				
For FY 2009			First Named Inventor K		Kazumi MINOGUCHI					
F01 F1 2009				Examiner Name		R. J. Severson				
Applicant claims small entity status. See 37 CFR 1.27			7	Art Unit		3731				
TOTAL AMOUNT OF PAYMENT		(\$) 130.00		Attorney Docket No.		0051-0226PUS1				
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION										
1. BASIC FILING, SEARCH, AND EXAMINATION FEES										
· · · · · · · · · · · · · · · · · · ·		NG FEES		ARCH FEES	EXAM	INATION FEES	:S			
Application Type F	ee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity	Eco (¢	Small Entity	Fana I	D_:_ (#)		
Utility <u>I</u>	330	165	540	Fee (\$) 270	Fee (\$) <u>Fee (\$)</u> 110	rees	<u>Paid (\$)</u>		
Design	220	110	100	50	140	70				
Plant	220	110	330	165	170	70 85				
Reissue	330	165	540	270	650	325				
Provisional	220	110	0	0	030	0				
2. EXCESS CLAIM FEES	220	110	U	V	U	U		Constitution		
Z. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$)										
Each claim over 20 (including Reissues)							52	26		
Each independent claim over 3 (including Reissues)							220	110		
Multiple dependent claims		,					390	195		
Total Claims			Fe	Fee Paid (\$)		Multiple Dependent Claims				
18 - 20 or HP x =			***************************************		-		ee Paid (\$			
HP = highest number of total claims p	aid for, if	greater than 20.								
Indep. Claims Extra C		Fee (\$)	Fe	e Paid (\$)						
4 -6 or HP =	·····)									
HP = highest number of independent	claims pai	id for, if greater than	ı 3.							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
	Sheets		. ,	Iditional 50 or frac	tion there	of Fee (\$)	Fee I	Paid (\$)		
100 = /50 = (round up to a whole number) x =										
4. OTHER FEE(S) Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): 1251 Extension for response within first month 130.00										
SUBMITTED BY										
Signature	1	1/		Registration No. (Attorney/Agent)	43,368	Telephone	(703) 205	5-8000		
Name (Print/Tyne) Paul C. Lewis				- Maria		Date	October 2			